Case 18-29494-JKS Doc 182 Filed 05/05/22 Entered 05/05/22 14:41:27 Desc Main Document Page 1 of 7

Fill in this information to identify your case:				
Debtor 1	Katherine A. Gol	cce		
	First Name	Middle Name	Last Name	
Debtor 2 Mutlu Gokce				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY	<u>,                                      </u>	
Case number	18-29494			
(if known)				

amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ed sche	edules after you file
Par	t 1: Summarize Your Assets		
			r assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$_	370,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	2,900.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	372,900.00
Par	t 2: Summarize Your Liabilities		
			r liabilities ount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	500,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	18,766.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	8,357.00
	Your total liabilities	\$	527,123.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$_	11,137.76
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	8,551.61
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other	schedules.
7.			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	persona	l, family, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this k	ox and	submit this form to the
Off	cial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

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Debtor 1	Katherine A. Gokce	· ·	
Debtor 2	Mutlu Gokce	Case number (if known)	18-29494
	court with your other schedules.	•	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$

\$\_\_\_\_\_\_\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	18766.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0
9d. Student loans. (Copy line 6f.)	\$	0
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0
9g. <b>Total.</b> Add lines 9a through 9f.	\$	18766.00

	in this information to identify your captor 1  Katherine A								
Deb	otor 2 Mutlu Gokce				_				
` '	use, if filing)								
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW JI	ERSEY		_				
	ee number 18-29494						d filing ent sho	l wing postpetition ne following date:	
O:	fficial Form 106l					MM / DD/ Y	YYY		
So	chedule I: Your Inc	ome							12/15
sup <sub>i</sub> spo atta	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and you th you, do not incl	r spouse ude infor	is liv mati	ing with you, incl on about your spo	ude in ouse. I	formation about f more space is	your needed,
1.	Fill in your employment								
	information.		Debtor 1			Debtor 2	or no	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	⊠ Employed             □ Not employed             □			⊠ Emplo □ Not e	,	ed	
	employers.  Include part-time, seasonal, or	Occupation	Sales Manage	r		Area Ma	anage	er	
	self-employed work.	Employer's name	Argus Internat	ional, In	c.	Perform	nance	Food Group,	Inc.
	Occupation may include student or homemaker, if it applies.	Employer's address	6021 S. Syracu 301 Englewood, Co	•	Sui	ite			
		How long employed th	nere? 4 mon	iths		1	mon	th	
Par	t 2: Give Details About Mor	othly Income							
Esti	mate monthly income as of the dass you are separated.		ou have nothing to re	eport for a	ny lir	e, write \$0 in the sp	ace. Ir	nclude your non-fi	ling spouse
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the informat	on for all e	empl	oyers for that perso	n on th	ne lines below. If	you need
						For Debtor 1		Debtor 2 or I-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	8,333.34	\$	6,154.17	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$	8,333.34	\$	6,154.17	

Debt Debt		Katherine A. Gokce Mutlu Gokce		Case n	number (if known)	18-29494		
				For I	Debtor 1	For Debto		
	Cop	y line 4 here	4.	\$	8,333.34		6,154.17	
5.	List	all payroll deductions:						
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans  Voluntary contributions for retirement plans	5a. 5b. 5c.	\$ \$	1,587.20 0.00 0.00	\$ \$ \$	1,639.04 0.00 0.00	
	5d. 5e. 5f.	Required repayments of retirement fund loans Insurance Domestic support obligations	5d. 5e. 5f.	\$ \$ \$	0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	5g. 5h.	Union dues Other deductions. Specify: Dental Medical	5g. _ 5h.+ _	\$ \$ \$	0.00	\$ + \$ 	0.00 160.11 789.36	
		Vision	_	\$	0.00	\$	39.04	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,587.20		2,627.55	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	6,746.14	\$	3,526.62	
8.	8b. 8c.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8a. 8b.	\$ \$	0.00	\$\$ \$	0.00	
	04	settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d. 8e. 8f.	Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8d. 8e.	\$ \$	0.00	\$ \$ \$_	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Bonus - separate check	_ <sup>8h.+</sup> ]	<u> </u>	0.00	+ \$	865.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	865.00	
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0. \$	6	\$ <mark>,746.14</mark> + \$_	4,391.62	2 = \$ 11,1	37.76
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your der friends or relatives.  The provided and the provided in lines 2-10 or amounts that are not a cify:	depen		•	ed in <i>Schedu</i>	ile J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result is the thick that amount on the Summary of Schedules and Statistical Summary of Certain lies						37.76
13.	Do :	you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	,				Combined monthly in	come

Fill in the	nis information to identify your case:				
Debtor '	Katherine A. Gokce		Che	eck if this is:	
Debtor 2	Mutlu Gokce			An amended filing A supplement show expenses as of the	ving postpetition chapter 13 s following date:
United S	States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
	· •				
(If know					
Offic	cial Form 106J				
	edule J: Your Expenses				12/1
Be as inform (if known)	complete and accurate as possible. If two married people ar ation. If more space is needed, attach another sheet to this fo wn). Answer every question.				or supplying correct
Part 1: 1. Is	Describe Your Household this a joint case?				
	No. Go to line 2.				
$\boxtimes$	Yes. Does Debtor 2 live in a separate household?  ⊠ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	ehold of De	htor 2	
2 0	<u> </u>	Tor coparate ricase	nou or be	5101 2.	
D	o not list Debtor 1 and Yes. Fill out this information for	Dependent's relati		Dependent's	Does dependent
	ebtor 2. each dependent o not state the	Debtor 1 or Debtor	2	age	live with you?
de	ependents names.	Daughter			⊠ Yes □ No
					Yes
					□ No
					☐ Yes ☐ No
ex	o your expenses include No xpenses of people other than Yes ourself and your dependents?			_	☐ Yes
Part 2:	Estimate Your Ongoing Monthly Expenses				
Estima	te your expenses as of your bankruptcy filing date unless yes as of a date after the bankruptcy is filed. If this is a suppable date.	ou are using this followed are using the following the second sec	orm as a s	upplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
	e expenses paid for with non-cash government assistance if	vou know the			
value (	of such assistance and have included it on Schedule I: Your	Income		V	
(Officia	al Form 106l.)			Your exp	enses
	ne rental or home ownership expenses for your residence. In ayments and any rent for the ground or lot.	nclude first mortgage	e 4.	\$	3,301.61
If	not included in line 4:				
48	a. Real estate taxes		4a.	\$	0.00
41			4b.	· <del></del>	0.00
40	. Home maintenance, repair, and upkeep expenses		4c.		250.00
40	d. Homeowner's association or condominium dues		4d.	\$	
5. <b>A</b>	dditional mortgage payments for your residence, such as ho	me equity loans	5.	\$	0.00
6. <b>U</b>	tilities:				
68			6a.	\$	375.00
6k	, , , , ,		6b.		
60		3	6c.	•	165.00
60	Other Specify: Cell Phone and Telephone		6d	\$	385 00

	otor 1 Katherine A. Gokce Mutlu Gokce	Case number (if known)	18-29494
7.	Food and housekeeping supplies	7. \$	1,200.00
8.	Childcare and children's education costs		1,500.00
9.	Clothing, laundry, and dry cleaning		150.00
10.	Personal care products and services		200.00
11.			100.00
12.	Transportation. Include gas, maintenance, bus or train fare.	🗸	100.00
	Do not include car payments.	12. \$	300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
14.	Charitable contributions and religious donations	14. \$	50.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance		275.00
	15d. Other insurance. Specify:	15d. \$	0.00
	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 2 Specify:	0. 16. \$	0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1		0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other Specify:	17c. \$	0.00
40	17d. Other Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not repededucted from your pay on line 5, Schedule I, Your Income (Official Form		0.00
10	Other payments you make to support others who do not live with you.	1061). 10. \$	0.00
13.	Specify:	ν 19.	0.00
20	Other real property expenses not included in lines 4 or 5 of this form or o		
20.	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	· —	
	20c. Property, homeowner's, or renter's insurance		
	20d. Maintenance, repair, and upkeep expenses	00 d	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21	Other: Specify: Pet Needs	21. +\$	150.00
	· · · · · · · · · · · · · · · · · · ·	Σ1. 1ψ	130.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	<u>8,551.61</u>
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2 \$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	8,551.61
23	Calculate your monthly net income.		
23.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	11,137.76
	23b. Copy your monthly expenses from line 22c above.		8,551.61
	200. Copy your monany expended from the 220 above.	23b\$	0,001.01
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your <i>monthly net income</i> .	23c. \$	2,586.15
	, ,	· <u>  +</u>	,
24.	Do you expect an increase or decrease in your expenses within the year at For example, do you expect to finish paying for your car loan within the year or do you expendification to the terms of your mortgage?  No.		rease or decrease because of a
	Yes. Explain here:		

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Fill in this in	formation to iden	tify your case:		Ü
Debtor 1	Katherine A. G	okce Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Mutlu Gokce	Middle Name	Last Name	
United States E	Bankruptcy Court for t	he: District of New Jerse	ey	
Case number (If known)	_18-29494			

Check if this is an amended filing

#### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT ar	n attorney to help you fill out bankruptcy forms?
✓ No	rationity to holp you his out saimt apicy to the
☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury. I declare that I have read the	he summary and schedules filed with this declaration and
that they are true and correct.	, ,
// 0/2	
Latifell-	* Way
<b>x</b> _/_/	
Sigrature of Debtor 1	Signatule of Debtor 2
Date 5/5 / 2022	Date 5/5/2022
MM / DD / YYYY	MM / DD / YYYY